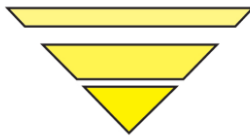


DIVISION OF  
**DEVELOPMENTAL  
DISABILITIES**



Division Directive Number  
3.100

Effective Date: October 1, 2009

*Bernard Simons*

Bernard Simons, Director

Title: **Quality Enhancement Review – Basic Health and Safety**

Application: Applies to Regional Office Quality Enhancement Teams

*Purpose: Prescribes a standardized procedure for Quality Enhancement review of contracted residential and day habilitation providers in the areas of consumer health, safety and rights.*

**Definitions:**

**Accreditation:** A designation achieved by a provider participating in a review of practices and programs conducted by the accrediting body based on international standards. The accrediting bodies recognized by the Division are the Rehabilitation Commission (CARF) and Council for Quality and Leadership (CQL).

**Action Plan Tracking System (APTS):** A Regional Office database designed to track issues identified through the Quality Enhancement Functions that require action and to recognize positive practices. Issues tracked will be identified through indicators categorized by health, safety, rights, services, and money, in addition to the Missouri Quality Outcomes.

**Certification:** A process used by the Division of Developmental Disabilities to review and approve specified providers for participation and funding through the Home and Community Based Medicaid Waiver program. Certification is granted for a 2-year period.

**Consumer Relations:** The Regional Office Unit responsible for development, implementation, and enhancement of the infrastructure of supports and services for individuals with developmental disabilities and their families. Consumer relations will have staff comprised of support coordination, intake/eligibility, transition (school to post-secondary education life) and meaningful day/employment; transition (habilitation centers), placement coordinators, self-directed supports/services, and in home support team.

**Contracted Provider:** An agency or individual that enters into a contract with the Department of Mental Health, Division of Developmental Disabilities, for direct or indirect services.

**Issues:** An area reviewed where a problem is identified.

**Missouri Quality Outcomes:** A collection of positive outcomes identified by people with disabilities, family members and friends outlined in the Missouri Quality Outcomes Discussion Guide <http://www.dmh.mo.gov/mrdd/progs/QualityoutMan.pdf>. The Discussion Guide document serves as a tool designed to assist the service delivery network to put these desired concepts into practice.

**Outcome:** An agreed upon result of action to be taken as outlined in a plan or other intervention, that resolves issues, prevents reoccurrence and increases opportunities for implementation of the Missouri Quality Outcomes.

**Provider Critical Status Plan:** Written outcome-based strategies outlining actions formulated from the integration or synthesis of information and issues gathered utilizing the Action Plan Tracking System (APTS), Customer Information Management, Outcomes, and Reporting system (CIMOR) as well as other available monitoring data. A Critical Status Plan is considered a serious situation that must be mitigated and/or corrected. Criteria for Critical Status Plans are included in Division Directive 4.080 Integrating Quality Enhancement Functions.

**Provider Improvement Plan:** Written outcome-based strategies outlining actions formulated from the integration or synthesis of information and issues gathered utilizing the Action Plan Tracking System (APTS), Customer Information Management, Outcomes, and Reporting system (CIMOR) as well as other available monitoring. Improvement Plans are written for the purpose of increasing performance above current levels, overall system improvement or to put processes into place to prevent an issue from developing into a more serious situation. These plans are only required under the criteria in the Provider Improvement Plan section of Division Directive 4.080 Integrating Quality Enhancement Functions.

**Provider Relations:** The Regional Office unit responsible for provider development to enhance the capacity for the provision of supports and services. In addition, the staff will provide technical assistance and monitoring; allocate resources, and management of the contracts with providers of supports and services.

**Quality Enhancement Review Guide:** Tool used by the Regional Quality Enhancement staff when performing a review which contains the areas of focus and comments documented.

**Regional Quality Enhancement Team:** Staff designated at each regional office to monitor, track, trend and report data from the quality enhancement functions as well as respond to special requests for data based upon current standards, outcomes and promising practices.

**Senate Bill 40 Board (SB 40):** Statutorily authorized county board that funds and/or provides services for people with developmental disabilities. As referred to in this directive, those specific SB 40 boards that fund or provide case management for the specified service in partnership with the Division of DD. <http://www.moga.mo.gov/statutes/c205.htm>

**Site:** Location where provider documentation is maintained. The site could be the consumer's residence, location of delivered service, or the provider's administrative office.

**State Quality Enhancement Unit:** Staff designated within the Division of Developmental Disabilities that oversees and implements statewide Quality Enhancement Functions.

## OVERVIEW

Quality Enhancement works in partnership with contracted providers that are nationally accredited and with those who are certified by the Division of DD to assist in achieving/maintaining the identified credential. Regional QE staff conducts an annual review of systems related to health, safety, and rights. The review is based upon the related Missouri Quality Outcomes, National Core Indicators, Certification Principles and outcome of accreditation activities.

## PROCESS

The Quality Enhancement (QE) Review is conducted routinely by the Regional Quality Enhancement (QE) staff. The QE Review Guide, located in the appendix, is used to review the outcomes identified. The intent of the review is to verify that the systems put into place by the contracted provider assure the related outcome. Feedback and recommendations, if indicated, are shared with provider staff at the time of the review.

For **accredited providers with accreditation granted for the full period of time possible**, information that relates to health and safety outcomes that would be presented for their accreditation visit are discussed and viewed by the Regional or State Quality Enhancement staff. This information may include but is not limited to annual safety reports, incident and injury summaries, internal or external safety inspections, reports of chart reviews. This process would comprise the complete review.

For **certified providers and those accredited for less than the full period of time possible, or who are currently on an Improvement Plan or Critical Status Plan**, information related to the health and safety outcomes will be discussed and viewed. The reviewer will include the observation of the outcomes through sampling of records, and observation/interaction with staff and consumers at a sample of sites.

The QE Review would take place on the years that either accreditation or certification is not conducting an on-site survey. For the years that either accreditation or certification does an on-site survey, the report generated by the certification team or the accrediting body is reviewed and any health/safety concerns identified in those reports are evaluated for needed documentation and follow-up.

In preparation for the review, the QE staff will summarize health, safety and rights data from other QE functions. The results of the summary will help to develop focus questions for discussion during the review and/or identify if a site needs to be included in the review. The QE staff will also look at any existing Provider Improvement or Critical Status Plans in preparation for the review. If a plan of correction for findings in certification or an improvement plan for findings in accreditation was required, a copy of that plan is requested for inclusion in the QE review. If the organization provides supports/services in more than one region, every effort is made to coordinate the review among the Regional Offices and the contracted provider.

If at any time during the process significant issues are identified, the QE reviewer will work with the contracted provider to expand the review. The QE reviewer may refer concerns to Provider Relations and/or Consumer Relations for follow-up.

When sites are visited, the number of sites chosen will depend upon the size and scope of the contracted provider.

Service Description	Service Location	Consumer Records
RCF/ALF (funded only)	20%, no less than 5	4 per location
Group Homes 4+ individuals	20%, no less than 5	4 per location
Group Homes 1-3 individuals	20%, no less than 5	2 per location
ISL	20%, no less than 5	2 per location
FLA	100%	2 per location
Day Habilitation	100% of on-site programs	20%, no less than 5

Results of the QE review are recorded on the QE Review Guide, discussed with the contracted provider's designated staff and a copy of the Guide given to the contracted provider when the reviewer leaves. Any significant issues identified or any positive practices are entered into APTS. Results of the QE Review are communicated to the Regional Director, Provider Relations, Consumer Relations and the related SB 40 Board/case management entity as indicated by outcome of the review. The need for a Provider Improvement Plan or Critical Status Plan is evaluated and, if required, follows the steps in the Division Directive 4.080 Integrating Quality Enhancement Functions.

**Authority:**

HCBS Medicaid Waiver: <http://dmhonline.dmh.state.mo.us/mrdd/manuals/hcb/sec13draft.pdf>

HCBS Medicaid Waiver Quality Assurances

9 CSR 45-5.060

9 CSR 10-1.010

## APPENDIX A

### Quality Enhancement Review Guide

**AGENCY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**REVIEWER:** \_\_\_\_\_

**PARTICIPANTS:** \_\_\_\_\_

The Quality Enhancement (QE) Review Guide is used by the Regional QE Staff to conduct the QE Review as described in Division Directive 3.100 Quality Enhancement Review – Basic Health and Safety. (link) This is intended to be a guide to ensure that **systems** are in place in the following areas and not simply to identify non-compliance with any single area.

**Missouri Quality Outcome:** People are supported to attain physical wellness.

**Related National Core Indicators:** People secure needed health services.

Medications are managed effectively and appropriately.

**Related Certification Principle:** Individuals maintain good health.

Areas Reviewed	Comments
Individuals obtain medical care at intervals recommended for other persons of similar health status.	
Individuals requiring specialized medical services have access to specialists.	
Recommendations of health care providers show follow-up.	
Individuals who have special dietary needs have those needs reviewed by a dietary consultant.	
Individuals' health is protected through measures typically taken to prevent communicable diseases for persons with similar health status.	
Individuals take medications as prescribed.	
Individuals are supported in safely managing their medications.	
Individuals' medications are regularly evaluated to determine their continued effectiveness.	
Individuals who take medications are supported by people who are knowledgeable about accepted standards of practice in medication management.	

**Missouri Quality Outcome:** People feel safe and experience emotional well-being.

People are supported in managing their home.

**Related National Core Indicator:** People are safe from abuse, neglect and injury.

**Related Certification Principle:** Assuring individual safety/Individuals' environments are safe while assuring choices and freedoms.

Areas Reviewed	Comments
Individuals receive the degree of supervision consistent with personal ability and the nature of the environment.	
Individuals' homes and other environments are clean, safe, and well maintained.	
Individuals' homes and other environments have modifications or adaptations to ensure safety.	
Individuals' homes and other environments have passed externally conducted health, safety, and mechanical inspections as required.	
Individuals' safety is assured through preventive maintenance of vehicles, equipment, and buildings.	
Individuals are transported safely.	
The temperature of individuals' homes is comfortable, usually within an accepted comfort range of 68 to 78 degrees, unless otherwise indicated per person's preference.	
Individuals are supported in responding to emergencies in a safe manner.	
Individuals participate in emergency drills occurring during daytime, evening, and nighttime hours at least four times annually.	
<ul style="list-style-type: none"><li>On-site Day Habilitation – At least one fire drill per month and a disaster drill twice per year are conducted.</li></ul>	
<ul style="list-style-type: none"><li>Residential Habilitation for 4 to 9 People At least one fire drill per quarter and one disaster/weather drill per quarter are conducted.</li></ul>	
<ul style="list-style-type: none"><li>Residential Habilitation for 10 to 16 People At least one fire drill per month and one disaster/weather drill per month are conducted.</li></ul>	
<ul style="list-style-type: none"><li>Residential Habilitation for 17 or More People At least one fire drill and one disaster/weather drill per month are conducted.</li></ul>	
Individuals are supported or served by staff who are knowledgeable about emergency procedures.	
Individuals have access to adequate evacuation exits.	
Individuals have properly marked and easily accessible firefighting equipment in their homes.	
Individuals incurring injuries or experiencing unusual incidents have this documented in their files.	

Individuals are supported or served by staff who have pertinent information to facilitate ordinary or emergency notification of family, guardians, and other interested parties.	
Individuals and staff use safe and sanitary practices in all phases of food preparation and clean up.	
Individuals use adaptive, corrective, mobility, orthotic, and prosthetic equipment which is in good repair.	

**Missouri Quality Outcomes:** People are provided support in a manner that creates a positive image.  
People feel safe and experience emotional well-being.

**Related National Core Indicator:** People are safe from abuse, neglect and injury

**Related Certification Principle:** Individuals are treated with respect in an environment that promotes dignity.

Areas Reviewed	Comments
Reporting of complaints of abuse, neglect or misuse of funds or property is done as required by 9 CSR 10-5.200. <a href="http://www.sos.mo.gov/adrules/csr/current/9csr/9csr.asp#9-10">http://www.sos.mo.gov/adrules/csr/current/9csr/9csr.asp#9-10</a>	
Event reporting is done as required by 9 CSR 10-5.206 <a href="http://www.sos.mo.gov/adrules/csr/current/9csr/9csr.asp#9-10">http://www.sos.mo.gov/adrules/csr/current/9csr/9csr.asp#9-10</a>	

#### COMMENTS: